



REPORTABLE PATHOGENS

Laboratory results indicating the following infections/diseases are to be reported to the OSDH by PHIDDO or telephone (405-426-8710) immediately upon suspicion, diagnosis, or positive test:

Bacillus anthracis
Bioterrorism - suspected organism
Clostridium botulinum
Corynebacterium diphtheriae
Hepatitis B virus during pregnancy
(HBsAg+)
Naegleria fowleri

Neisseria meningitidis (sterile site)
Novel coronavirus
Novel influenza A
Outbreaks of apparent infectious organism
Poliovirus
Rabies virus
Rubeola virus (Measles)

Salmonella Typhi
Variola virus (Smallpox)
Viral hemorrhagic fever
Yersinia pestis

Laboratory evidence of the following is to be reported to the OSDH via secure electronic data transmission within one working day (Monday through Friday, State holidays excepted):

Acid Fast Bacillus (AFB) positive smear
(only if no additional testing is performed
or subsequent testing is indicative of
Mycobacterium tuberculosis Complex)
Anaplasma phagocytophilum
Arboviral infections (West Nile virus, St.
Louis encephalitis virus, Eastern equine
encephalitis virus, Western equine
encephalitis virus, Powassan virus,
California serogroup virus, Chikungunya
virus, Zika virus)
Bordetella pertussis
Borrelia burgdorferi
Brucella spp.
Campylobacter spp.
Chlamydia psittaci
Clostridium tetani
Coxiella burnetii
Cryptosporidium spp.
Cyclospora cayentanensis
Dengue virus
Ehrlichia spp.
Escherichia coli O157, O157:H7 or a Shiga
toxin producing *E. coli* (STEC)

Francisella tularensis
Haemophilus influenzae (sterile site)
Hantavirus
Hepatitis A (Anti-HAV-IgM+)
Hepatitis B virus (HBsAg+, anti-HBc IgM+,
HBeAg+, and/or HBV DNA+)¹
Hepatitis C virus (persons having jaundice
or ALT ≥ 200 with laboratory confirmation)¹
(If hepatitis C EIA is confirmed by NAT for HCV RNA, or s/co
ratio or index is predictive of a true positive then report re-
sults of the entire hepatitis panel. Positive HCV RNA are
reportable by both laboratories and providers. Negative test
results for HCV RNA tests are reportable by laboratories
only.)
Human Immunodeficiency Virus (HIV)
(All HIV tests must be reported regardless of result, in-
cluding HIV nucleotide sequences.)
Legionella spp.
Leptospira interrogans
Listeria monocytogenes
Mumps virus
Mycobacterium tuberculosis
Plasmodium spp.
Rickettsia rickettsii
Rubella virus
Salmonella spp.

Shigella spp.
Streptococcus pneumoniae (sterile site),
children <5 yrs.
Streptococcus pyogenes (sterile site)
Treponema pallidum (Nontreponemal and
treponemal tests are reportable. If any
syphilis test is positive, then all syphilis
test results on the panel must be reported.
For infants ≤18 months, all syphilis tests
ordered, regardless of test result, must be
reported.)
Trichinella spiralis
Unusual or uncommon pathogens
Vibrionaceae family (*Vibrio* spp. including *V.*
cholerae, *Grimontia* spp., *Photobacterium*
spp. and other genera in the family)
Yellow fever virus

¹ with entire Hepatitis panel results

Laboratory evidence of the following is to be reported to the OSDH within one month:

CD4 cell count with cell count %
(by laboratories only)
Chlamydia trachomatis

Creutzfeldt-Jakob disease
Neisseria gonorrhoeae
HIV viral load (by laboratories only)

Lymphogranuloma Venereum (LGV) is
reportable as Chlamydia.

Pure isolates of the following organisms must be sent to the OSDH Public Health Laboratory within two (2) working days (Monday-Friday, state holidays excepted) of final ID/diagnosis

Bacillus anthracis
Brucella spp.
Carbapenem-resistant *Acinetobacter* spp.
Carbapenem-resistant *Enterobacteriaceae*
Carbapenem-resistant *Pseudomonas*
aeruginosa.
Escherichia coli O157, O157:H7, or a Shiga
toxin producing *E. coli* **
Francisella tularensis

Haemophilus influenzae (sterile site isolates)
Listeria monocytogenes (sterile site isolates)
Mycobacterium tuberculosis
Neisseria meningitidis (sterile site isolates)
Plasmodium spp.
Salmonella spp. **
Vibrionaceae family **
(*Vibrio* spp., *Grimontia* spp., *Photobacterium*
spp. and other genera in the family) **

Yersinia spp. **

** Laboratories unable to perform reflex culture
for isolation/recovery of specified bacterial path-
ogens detected by CIDT assays shall submit
positive CIDT stool samples in Cary Blair or mod-
ified Cary Blair transport media to the OSDH PHL
within two (2) (Monday through Friday, state holi-
days excepted) working days of final CIDT result.

Acute Disease Service
(405) 426-8710
Available 24 Hours a Day

**Sexual Health & Harm Reduction
Service**
Ph: (405) 426-8400 / Fax (405) 900-7586

Public Health Laboratory
(405) 564-7750
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